24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Freedom Partners Action Fund, Inc.	C C00564765
	M = M / D = D / Y = Y = Y
Check if 24-hour report 48-hour report New report Amends report filed	
Full Name of Payee FP1 STRATEGIES LLC	Date of Public Distribution/Dissemination
Mailing Address PO BOX 16504	09 16 2014
	Amount
City State Zip Code	27000.00
ALEXANDRIA VA 22302	Transaction ID : SE24.80 Date of Disbursement or Obligation
Purpose of Expenditure TV/MEDIA PRODUCTION Category/ Type	09 16 2014
Name of Federal Candidate Support Office	e Sought: House District:
KAY R. HAGAN Oppose	President State: NC State:
Calendar Year-To-Date Per Election for Office Sought Disbut	ursement For: Primary X General Other (specify) ▶
Full Name of Payee FP1 STRATEGIES LLC	Date of Public Distribution/Dissemination
	09 16 2014
Mailing Address PO BOX 16504	Amount
City State Zip Code	2950.00
ALEXANDRIA VA 22302	Transaction ID : SE24.81 Date of Disbursement or Obligation
Purpose of Expenditure TV/MEDIA PRODUCTION Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	e Sought: House District:
KAY R. HAGAN Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For:
(a) OUDTOTAL of the circuit and be decreased and Emparatheres	20252.00
(a) SUBTOTAL of Itemized Independent Expenditures	29950.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mwith, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
= 3.10	09 17 2014
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PENT EXI END	ATOTILO	PAGE 2 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	_		FEC IDENTIFICATION NUMBER ▼
Freedom Partners Action Fund, In	C.		C C00564765
Check if 24-hour report X 48-hour report	X New re	port Amends repo	ort filed on 09 17 2014
Full Name of Payee			Date of Public Distribution/Dissemination
I360			09 16 / 2014
Mailing Address PO BOX 37076			Amount
City	State	Zip Code	382025.00
BALTIMORE	MD	21297	Transaction ID : SE24.74 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT - BROADCAST/CABLE		Category/ Type	09 / 11 / 2014
Name of Federal Candidate		Support	Office Sought: House District:
KAY R. HAGAN		X Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		443132.06	Disbursement For: Primary General 2014 Other (specify) ▶
Full Name of Payee			Date of Public Distribution/Dissemination
OLD SCHOOL PRODUCTIONS			09 16 7 2014
Mailing Address PO BOX 99667			Amount
City	State	Zip Code	31157.06
RALEIGH	NC	27624	Transaction ID : SE24.76 Date of Disbursement or Obligation
Purpose of Expenditure TV/MEDIA PRODUCTION		Category/ Type	09 / 16 / Y 2014
Name of Federal Candidate		Support	Office Sought: House District:
KAY R. HAGAN		X Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		443132.06	Disbursement For: Primary General 2014 General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Exper	ditures		• 413182.06
, , ,			7 7 7
(b) SUBTOTAL of Unitemized Independent Exp	enditures		•
(c) TOTAL Independent Expenditures			443132.06
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Thomas F. Maxwell III Signature	[Electro	nically Filed] Date	9 09 17 2014
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